

Harcros Pigments Inc.

P.O. Box 8215
4650 Shellmound Street
Emeryville, CA 94662
Telephone (415)653-6151



90 OCT 10 AM 11:41

HARCROS
CHEMICAL GROUP

Oct. 5, 1990

Alameda County Dept of Environmental Health
Hazardous Materials Program
80 Swan Way, Room 200
Oakland, Ca. 94621

Attn: G. M. Wistar, Hazardous Materials Specialist

Re: Soil and Water Disposal, Diesel Site, 4650 Shellmound St.

As requested in your letter of 19 Sept. '90, we supply the following details of the disposal of the diesel fuel contaminated soil and water from the excavation on our property at 4650 Shellmound St., Emeryville.

Soil

Soil was removed from the excavation and piled on plastic sheeting. Three drums of soil from well borings was added to the pile. Soil composite samples were analyzed and found to show TPH-D levels of 260ppm and 760ppm, as diesel. Lab results are attached.

The soil was hauled by Dillard Trucking Inc. to the Liquid Waste Management Inc. Class II facility at McKittrick, California. Documentation attached shows 84 cubic yards of soil weighting 100.18 tons was transported and disposed.

Water

Approximately 3000 gals of water was removed from the excavation and from the purging of monitoring wells. The water was held in storage tanks before disposal. The water was not analyzed but was presumed to be contaminated based on the appearance of an oily sheen on the water. With the agreement of Liquid Waste Management Inc. the water was used to wash out containers of waste iron oxide and the combined contaminated water and iron oxide solids were transported by Kern Vacuum Service (Erickson Enterprises) to the Liquid Waste Management Inc. Class II facility in McKittrick, California. Documentation is attached.

If there are any questions concerning the disposal of the soil and water, I may be reached at the above telephone number, extension 246.

M. S. HERZOG,
Environmental/Project Mgr.

cc: J. DeMartini, Roux Associates West
W. C. Groth
J. N. Deblock
T. J. Lee

AUG 30 '90 09:22 C&T BERKELEY

P.3



LABORATORY NUMBER: 101361
CLIENT: ROUX ASSOCIATES
JOB #: 19801W
LOCATION: EMERYVILLE

DATE RECEIVED: 08/10/90
DATE EXTRACTED: 08/13/90
DATE ANALYZED: 08/15/90
DATE REPORTED: 08/17/90

Extractable Petroleum Hydrocarbons in Soils & Wastes
California DOHS Method
LUFT Manual October 1989

LAB ID	CLIENT ID	KEROSENE RANGE (mg/Kg)	DIESEL RANGE (mg/Kg)	REPORTING LIMIT (mg/Kg)
101361-9	CS-1A-D	ND	260	10
101361-10	CS-2A-D	ND	760	10

ND = Not Detected at or above reporting limit.

QA/QC SUMMARY

RPD, %	3
RECOVERY, %	117

Dillard Trucking, Inc.

HAZARDOUS WASTE TRANSPORTATION
ROUTE 1, BOX 73 BYRON, CALIFORNIA 94514
(415) 634-0567 FAX 634-0569

FAX COVER DOCUMENT

DATE: 10-3-90

PLEASE DELIVER THE FOLLOWING 6 PAGES, INCLUDING THIS COVER TO:

TO: Harcos Pigments, Inc

ATTENTION: Mike Herzog

RECEIVER FAX: 653-0960

FROM: DILLARD TRUCKING, INC.

Donna

SENDER FAX: 415-634-0569

REGARDING: Copies of Non Hazardous Data Forms
soil transported 9-26-90 to
Liquid Waste Mgmt
IF you have any questions
please call

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Harcos Pigments, Inc. EPA I.D. NO. EPA EXEMPT

ADDRESS P. O. Box 8215

CITY, STATE, ZIP Emeryville, CA 94662 Site: 4650 Shellmound, Emeryville PHONE NO. 415 653-6151

CONTAINERS: No. 107291 VOLUME 187 WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

WASTE DESCRIPTION Soil with Diesel GENERATING PROCESS Site Clean Up

COMPONENTS OF WASTE		PPM	%	COMPONENTS OF WASTE		PPM	%
1.	<u>Soil</u>		<u>99.9</u>	5.			
2.	<u>Diesel</u>		<u><0.1</u>	6.			
3.				7.			
4.				8.			

PROPERTIES: Neutral SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: Approval 091490-680

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

ROBERT A. BEGGS Robert A. Beggs 9/26/90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Dillard Trucking, Inc. EPA I.D. NO. CAD981692809

ADDRESS Route 1 Box 73 SERVICE ORDER NO. _____

CITY, STATE, ZIP Byron, California 94514 PICK UP DATE _____

PHONE NO. 415 634-0587 Douglas Stephen 9/26/90
TRUCK, UNIT, I.D. NO. 1648 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Liquid Waste Management, Inc. EPA I.D. NO. CAD9810636831

ADDRESS Star Route Box 4 DISPOSAL METHOD LANDFILL OTHER _____

CITY, STATE, ZIP McKittrick, Ca. 93251

PHONE NO. 805 762-7366 MARTINA DOLZ 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS	DISCREPANCY
TRANS		S	B	<u>22.52</u>	
C/O		RT/CD	HWDF. NONE	<u>Ph. 6.0</u>	

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Harcos Pigments, Inc. ADDRESS P. O. Box 8215 CITY, STATE, ZIP Emeryville, CA 94662 Site: 4650 Shellmound, Emeryville PHONE NO. 415 653-6151

EPA I.D. NO. EPA EXEMPT

CONTAINERS: No 102971 VOLUME 10y WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

WASTE DESCRIPTION Soil with Diesel GENERATING PROCESS Site Clean Up

COMPONENTS OF WASTE			PPM	%	COMPONENTS OF WASTE			PPM	%
1.	<u>Soil</u>			<u>99.9</u>	5.				
2.	<u>Diesel</u>			<u><0.1</u>	6.				
3.					7.				
4.					8.				

PROPERTIES: pH Neutral SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: Approval 091490-680

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

[Signature] 26 Sept '90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Dillard Trucking, Inc. ADDRESS Route 1 Box 73 CITY, STATE, ZIP Byron, California 94514 PHONE NO. 415 634-0367

EPA I.D. NO. CAD981692809

TRUCK, UNIT, I.D. NO. 83 SERVICE ORDER NO. _____ PICK UP DATE 9-26-90

[Signature] 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Liquid Waste Management, Inc. ADDRESS Star Route Box 4 CITY, STATE, ZIP McKittrick, Ca. 93251 PHONE NO. 805 762-7366

EPA I.D. NO. CAD980628831

DISPOSAL METHOD: LANDFILL OTHER _____

MARTHA DOLE [Signature] 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	
C/O		RT/CD		HWDF NONE

7.17
Ph. 6.0

DISCREPANCY

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Harcos Pigments, Inc. EPA I.D. NO. EPA EXEMPT

ADDRESS P. O. Box 8215

CITY, STATE, ZIP Emeryville, CA 94662 Site: 4650 Shellmound, Emeryville PHONE NO. 415 653-6151

CONTAINERS: No. 100969 VOLUME 181 WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

WASTE DESCRIPTION Soil with Diesel GENERATING PROCESS Site Clean Up

COMPONENTS OF WASTE		PPM	%	COMPONENTS OF WASTE		PPM	%
1.	<u>Soil</u>		<u>99.9</u>	5.			
2.	<u>Diesel</u>		<u><0.1</u>	6.			
3.				7.			
4.				8.			

PROPERTIES: Neutral SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: Approval 091490-680

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

ROBERT A BEGGS RO Beggs 9/26/90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Dillard Trucking, Inc. EPA I.D. NO. CAD981692809

ADDRESS Route 1 Box 73 SERVICE ORDER NO. _____

CITY, STATE, ZIP Byron, California 94514 PICK UP DATE _____

PHONE NO. (415) 634-0567 JIM Payne Jim Payne 9-26-90
TRUCK, UNIT, I.D. NO. 8 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Liquid Waste Management, Inc. EPA I.D. NO. CAD980636831

ADDRESS Star Route Box 4 DISPOSAL METHOD LANDFILL OTHER _____

CITY, STATE, ZIP McKittrick, Ca. 93251

PHONE NO. 805 762-7366 MARTHA DOLE Martha Dole 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN _____ OLD/NEW _____ L A TONS 23.97

DD L.A.

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Harcos Pigments, Inc. EPA I.D. NO. EPA EXEMPT

ADDRESS P. O. Box 8215

CITY, STATE, ZIP Emeryville, CA 94662 Site: 4650 Shellmound, Emeryville PHONE NO. 415 653-6151

CONTAINERS: No. 107290 VOLUME 18yd WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

WASTE DESCRIPTION Soil with Diesel GENERATING PROCESS Site Clean Up

COMPONENTS OF WASTE		PPM	COMPONENTS OF WASTE		PPM
1. <u>Soil</u>		<u>99.9</u>	5. _____		
2. <u>Diesel</u>		<u><0.1</u>	6. _____		
3. _____			7. _____		
4. _____			8. _____		

PROPERTIES: Neutral pH SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: Approval 091490-680

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

ROBERT A. BEGGS Robert A. Beggs 9/26/90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Dillard Trucking, Inc. EPA I.D. NO. CAD981892809

ADDRESS Route 1 Box 73 SERVICE ORDER NO. _____

CITY, STATE, ZIP Byron, California 94514 PICK UP DATE _____

PHONE NO. 415 634-0567 Thomas E. Watson Thomas E. Watson 9-26-90
TRUCK, UNIT, I.D. NO. 21 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Liquid Waste Management, Inc. EPA I.D. NO. CAD980636831

ADDRESS Star Route Box 4 DISPOSAL METHOD LANDFILL OTHER _____

CITY, STATE, ZIP McKittrick, Ca. 93251

PHONE NO. 805 762-7366 MARTHA DOLE Martha Dole 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	<u>23.28</u>
		RT/CD	HWDF NONE	

DISCREPANCY

Ph. 6.0

NON-HAZARDOUS WASTE DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Harcos Pigments, Inc. ADDRESS P. O. Box 8215 CITY, STATE, ZIP Emeryville, CA 94662 EPA I.D. NO. EPA EXEMPT PHONE NO. 415 653-6151

Site: 4650 Shellmound, Emeryville

CONTAINERS: No. 100972 VOLUME 20 YDS WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

WASTE DESCRIPTION Soil with Diesel GENERATING PROCESS Site Clean Up

COMPONENTS OF WASTE			PPM	%	COMPONENTS OF WASTE			PPM	%
1.	<u>Soil</u>			<u>99.9</u>	5.				
2.	<u>Diesel</u>			<u><0.1</u>	6.				
3.					7.				
4.					8.				

PROPERTIES: pH Neutral SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: Approval 091490-680

THE GENERATOR CERTIFIES THAT THE WASTE AS DESCRIBED IS 100% NON-HAZARDOUS.

ROBERT A. BEGGS Rob Beggs 9/26/90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Dillard Trucking, Inc. ADDRESS Route 1 Box 73 CITY, STATE, ZIP Byron, California 94514 EPA I.D. NO. CAD081692809 SERVICE ORDER NO. _____ PHONE NO. 415 634-0567 PICK UP DATE _____ TRUCK, UNIT, I.D. NO. 1937 LEE NECKER Lee Necker 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Liquid Waste Management, Inc. ADDRESS Star Route Box 4 CITY, STATE, ZIP McKittrick, Ca. 93251 EPA I.D. NO. CAD080636831 DISPOSAL METHOD LANDFILL OTHER _____ PHONE NO. 805 762-7366 MARTHA DOVE Martha Dove 9-26-90
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	<u>23.24</u>
C/O		RT/CO	HWDF NONE	

DISCREPANCY Ph. 6.0

KERN BACKHOE SERVICE INC. — KERN VACUUM SERVICE

Well, Tank No. _____

P.O. BOX 5337 • BAKERSFIELD, CALIFORNIA 93388

(805) 589-5220

No 13968

Field or Area _____

NON-HAZARDOUS WASTE HAULER RECORD TO BE USED FOR NON-HAZARDOUS WASTES ONLY

GENERATOR (Generator Must Complete)

1 Name Harcros Pigments, Inc.

Field Address 4650 Shellmound Street

City, State, Zip Emeryville, California 94608

Phone (415) 653-6151

Order Placed By J. Deblock

Signature of Authorized Agent J. Deblock

Date 9-13-90

Title Maths Mgr

WASTE TO BE DISPOSED

Type Iron Oxide

2 Generating Location Emeryville, California 94608

Special Handling Instructions:

Gloves Goggles Other _____

Quantity 90 Bbls.

DESIGNATED FACILITY

3 Name LWM

Address _____

City, State, Zip McKittrick CA.

Phone 762-7607

TRANSPORTER (Hauler Must Complete)

Name Kern Vacuum Service

Address P. O. Box 5337

City, State, Zip Bakersfield, California 93388

Phone (805) 589-5220

Signature of Authorized Agent or Driver James Castel

Date 9/13/90

Ticket # 101944 Unit No. T28 / T26

Pick Up Date 9-13-90 Time 12:30 AM PM

NOTE: This form to be used in lieu of the California Department of Health Services Hazardous Waste Manifest for NON-HAZARDOUS wastes only.

REMARKS:

DISPOSAL FACILITY (Facility Operator Must Complete)

Name L.W.M.

Address Star Rt Box 4

City, State, Zip McKittrick Ca 93251

Phone 762-7366 / Disp. Ticket # _____

Signature of Authorized Agent Thelma Villines Date 9-13-90

Quantity Received 15.70 ^{TONS} Bbls. Date 9-13-90

Time _____ AM PM PH#70

DISPOSAL METHOD: Surface Impoundment Injection
 Landfill Other _____

Return Copy To: **GENERATOR UNLESS OTHERWISE SPECIFIED**

NOTE: It is not necessary to send copy to Dept. of Health Services.
NO HAZARDOUS FEES SHOULD BE LEVIED

WEIGHMASTER CERTIFICATE
 THIS IS TO CERTIFY that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food and Agriculture.

LIQUID WASTE MANAGEMENT, INC. — WEIGHMASTER
 STAR ROUTE BOX 4 • McKittrick, CA 93251
 (805) 782-7366

12566

WEIGHING LOCATION:
HIGHWAY 58, 1/4 MILE WEST OF HIGHWAY 33
McKITTRICK, CALIFORNIA

If Waste Is Weighed it is 100% Nonhazardous

DATE	TIME	WEIGHT IN LBS.
9-13-90	5:11PM	69640
9-13-90	5:54PM	38240
		<u>31400</u>
		<u>15.70</u>

GROSS BY Thelma Villines
 TARE BY Thelma Villines
 DEPUTY
 DEPUTY
 WEIGHED FOR / SELLER Harcross Pigments
 DELIVERED TO / BUYER J.W.M.
 DRIVER [Signature]

VEHICLE LIC. NOS.	TRAILER LIC.	TRAILER LIC.	COMMODITY	UNITS	B/L NO.
<u>4A12995</u>	<u>New</u>		<u>Iron Oxide</u>	<u>90-B</u>	<u>13968</u>
<u>CARRIER Kern Val # T-28</u>				FEE: <input type="checkbox"/> PD <input type="checkbox"/> CHG \$	

KERN BACKHOE SERVICE INC. — KERN VACUUM SERVICE

Well, Tank No. _____

P.O. BOX 5337 • BAKERSFIELD, CALIFORNIA 93388

(805) 589-5220

No 13964

Field or Area _____

NON-HAZARDOUS WASTE HAULER RECORD TO BE USED FOR NON-HAZARDOUS WASTES ONLY

GENERATOR

(Generator Must Complete)

1 Name Harcros Pigments, Inc.
Field Address 4650 Shellmound Street
City, State, Zip Emeryville, California 94608
Phone (415) 653-6151
Order Placed By J. Deblock
Signature of Authorized Agent [Signature]
Date 9/13/90
Title Matt's Mgr

WASTE TO BE DISPOSED

2 Type Iron Oxide
Generating Location Emeryville, California 94608
Special Handling Instructions:
 Gloves Goggles Other _____
Quantity 100 Bbls.

DESIGNATED FACILITY

3 Name LWM
Address _____
City, State, Zip McKittrick, CA
Phone 762-7607

TRANSPORTER

(Hauler Must Complete)

Name Kern Vacuum Service
Address P. O. Box 5337
City, State, Zip Bakersfield, California 93388
Phone (805) 589-5220
Signature of Authorized Agent or Driver [Signature]
Date 9-13-90

Ticket # 105304 Unit No. T-1 1 T9
Pick Up Date 9-13-90 Time 7:00 AM PM

NOTE: This form to be used in lieu of the California Department of Health Services Hazardous Waste Manifest for NON-HAZARDOUS wastes only.

REMARKS:

DISPOSAL FACILITY

(Facility Operator Must Complete)

Name L. W. M.
Address Star Pt Box 4
City, State, Zip McKittrick Ca 93251
Phone 762-7366 / Disp. Ticket # _____
Signature of Authorized Agent [Signature] Date 9-13-90

Quantity Received 16.04 Bbls. Date 9-13-90
Time _____ AM PM PH# 7.0

DISPOSAL METHOD: Surface Impoundment Injection
 Landfill Other _____

Return Copy To: **GENERATOR UNLESS OTHERWISE SPECIFIED**

NOTE: It is not necessary to send copy to Dept. of Health Services.
NO HAZARDOUS FEES SHOULD BE LEVIED

WEIGHMASTER CERTIFICATE

THIS IS TO CERTIFY that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 (commencing with Section 2700) of Division 6 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food and Agriculture.

LIQUID WASTE MANAGEMENT, INC. — WEIGHMASTER
 STAR ROUTE BOX 4 • McKittrick, CA 93251
 (805) 782-7366

12567

WEIGHING LOCATION:

**HIGHWAY 58, 1/4 MILE WEST OF HIGHWAY 33
 MCKITTRICK, CALIFORNIA**

If Waste Is Weighed it is 100% Nonhazardous

DATE	TIME	WEIGHT IN LBS.	
9-13-90	5:16PM	70200	GROSS
9-13-90	6:05PM	38180	TARE
		<u>32020</u>	NET
		<u>16.04</u>	TONS

GROSS BY *Thelma Villines*

TARE BY *Thelma Villines* DEPUTY

WEIGHED FOR / SELLER *Aracelis Riquelme*

DELIVERED TO / BUYER *L.W.M.*

DRIVER *Joe Bada*

VEHICLE LIC. NOS.	TRAILER LIC.	TRAILER LIC.	COMMODITY	UNITS	B/L NO.
			<i>oxide</i> <i>Iron Oxide</i>	<i>100-B</i>	<i>13964</i>
CARRIER <i>Kern Vac # T-1</i>			FEE: <input type="checkbox"/> PD <input type="checkbox"/> CHG \$		

KERN BACKHOE SERVICE INC. — KERN VACUUM SERVICE

Well, Tank No. _____

P.O. BOX 5337 • BAKERSFIELD, CALIFORNIA 93388

Field or Area _____

(805) 589-5220

№ 13966

NON-HAZARDOUS WASTE HAULER RECORD TO BE USED FOR NON-HAZARDOUS WASTES ONLY

GENERATOR

(Generator Must Complete)

1 Name Harcros Pigments, Inc.

Field Address 4650 Shellmound Street

City, State, Zip Emeryville, California 94608

Phone (415) 653-6151

Order Placed By J. Deblock

Signature of Authorized Agent
[Signature]

Date 9-10-90

Title _____

WASTE TO BE DISPOSED

Type Iron Oxide

2 Generating Location Emeryville, California 94608

Special Handling Instructions:

Gloves Goggles Other _____

Quantity 100 Bbls.

DESIGNATED FACILITY

3 Name _____

Address _____

City, State, Zip _____

Phone _____

TRANSPORTER

(Hauler Must Complete)

Name Kern Vacuum Service

Address P. O. Box 5337

City, State, Zip Bakersfield, California 93388

Phone (805) 589-5220

Signature of Authorized Agent or Driver
[Signature]

Date 9-10-90

Ticket # 100890 Unit No. T-12 / T-9

Pick Up Date 9-10-90 Time 7:00 AM PM

NOTE: This form to be used in lieu of the California Department of Health Services Hazardous Waste Manifest for NON-HAZARDOUS wastes only.

REMARKS:

DISPOSAL FACILITY

(Facility Operator Must Complete)

Name L. W. M.

Address Star Rt Box

City, State, Zip McKittrick Ca 95251

Phone (805) 762-7366 / Disp. Ticket # _____

Signature of Authorized Agent
[Signature] Date 9-10-90

Quantity Received PH# 270 19.16 ^{TONS} Bbls. Date 9-10-90

Time _____ AM PM

DISPOSAL METHOD: Surface Impoundment Injection
 Landfill Other _____

Return Copy To: **GENERATOR UNLESS OTHERWISE SPECIFIED**

NOTE: It is not necessary to send copy to Dept. of Health Services.
NO HAZARDOUS FEES SHOULD BE LEVIED

GENERATOR COPY

WEIGHMASTER CERTIFICATE
 CERTIFY that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by commencing with Section 12700) of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food and Agriculture.

LIQUID WASTE MANAGEMENT, INC. — WEIGHMASTER
 STAR ROUTE BOX 4 • McKittrick, CA 93251
 (805) 762-7366

12492

LOCATION:
 HWY 58, 1/4 MILE WEST OF HIGHWAY 33
 KITTRICK, CALIFORNIA

If Waste is Weighed it is 100% Nonhazardous

DATE	TIME	WEIGHT IN LBS.	
9-10-90	5:08PM	76500	GROSS
9-10-90	5:47PM	38180	TARE
		<u>38320</u>	NET
		<u>19.16</u>	TONS

GROSS BY *Thelma Villines*
 TARE BY *Thelma Villines*
 WEIGHED FOR/SELLER *Harvey Riquenza*
 DELIVERED TO/BUYER *L.W.M.*
 DRIVER *Richard Benner*

TRUCK LIC. NOS.	TRAILER LIC.	TRAILER LIC.	COMMODITY	UNITS	B/L NO.
3257327	1up8571		<i>Snow & Oxide</i>	100.B	13966
	<i>Benner</i>	<i>Doc T-12</i>			

FEE PD CHG \$

KERN BACKHOE SERVICE INC. — KERN VACUUM SERVICE

Well, Tank No. _____

P.O. BOX 5337 • BAKERSFIELD, CALIFORNIA 93388

Field or Area _____

(805) 589-5220

No 13967

NON-HAZARDOUS WASTE HAULER RECORD TO BE USED FOR NON-HAZARDOUS WASTES ONLY

GENERATOR (Generator Must Complete)

1 Name Harcros Pigments, Inc.

Field Address 4650 Shellmound Street

City, State, Zip Emeryville, California 94608

Phone (415) 653-6151

Order Placed By J. Deblock

Signature of Authorized Agent
[Signature]

Date _____

Title _____

WASTE TO BE DISPOSED

Type Iron Oxide

2 Generating Location Emeryville, California 94608

Special Handling Instructions:

Gloves Goggles Other _____

Quantity 100 Bbls.

DESIGNATED FACILITY

3 Name Liquid Waste Management

Address Highway 33 + Highway 58

City, State, Zip McKittrick, CA

Phone _____

TRANSPORTER (Hauler Must Complete)

Name Kern Vacuum Service

Address P. O. Box 5337

City, State, Zip Bakersfield, California 93388

Phone (805) 589-5220

Signature of Authorized Agent or Driver
[Signature]

Date 9-10-90

Ticket # 102344 Unit No. T-11 / T-14

Pick Up Date 9-10-90 Time _____ AM PM

NOTE: This form to be used in lieu of the California Department of Health Services Hazardous Waste Manifest for NON-HAZARDOUS wastes only.

REMARKS:

DISPOSAL FACILITY (Facility Operator Must Complete)

Name L.W.M.

Address Star Rt Box 4

City, State, Zip McKittrick Ca 93251

Phone 762-1366 / Disp. Ticket # _____

Signature of Authorized Agent
[Signature] Date 9-10-90

Quantity Received 17.80 ^{TONS} Bbls. Date 9-10-90

Time _____ AM PM

DISPOSAL METHOD: Surface Impoundment Injection
 Landfill Other _____

Return Copy To: **GENERATOR UNLESS OTHERWISE SPECIFIED**

NOTE: It is not necessary to send copy to Dept. of Health Services.
NO HAZARDOUS FEES SHOULD BE LEVIED

GENERATOR COPY

011 H-70

WEIGHMASTER CERTIFICATE
 The following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Section 12700 of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food and Agriculture.

OLID WASTE MANAGEMENT, INC. — WEIGHMASTER
 STAR ROUTE BOX 4 • McKittrick, CA 93261
 (805) 782-7366

12493

LOCATION:

AY 58, 1/4 MILE WEST OF HIGHWAY 33
 KITTRICK, CALIFORNIA

If Waste Is Weighed It is 100% Nonhazardous

DATE	TIME	WEIGHT IN LBS.	GROSS
9-10-90	5:11PM	73300	
9-10-90	5:53PM	37700	TARE
		35600	NET
		17.80	TONS

GROSS BY *Thelma Williams*
 TARE BY *Thelma Williams* DEPUTY
 DEPUTY

WEIGHED FOR / SELLER *Marines Regiment*
 DELIVERED TO / BUYER *T.W.M.*
 DRIVER *Jim Job*

VEHICLE LIC. NOS.	TRAILER LIC.	TRAILER LIC.	COMMODITY	UNITS	B/L NO.
3Z 57325	1UR 2577		<i>Iron Oxide</i>	100B	13967
CARRIER <i>Kern Van H T-11</i>			FEE: <input type="checkbox"/> PD <input type="checkbox"/> CHG \$		

KERN BACKHOE SERVICE INC. — KERN VACUUM SERVICE

Well Tank No. _____

P.O. BOX 5337 • BAKERSFIELD, CALIFORNIA 93388

(805) 589-5220

No 13965

Field of Area _____

NON-HAZARDOUS WASTE HAULER RECORD TO BE USED FOR NON-HAZARDOUS WASTES ONLY

GENERATOR

(Generator Must Complete)

1 Name Harcros Pigments, Inc.
Field Address 4650 Shellmound Street
City, State, Zip Emeryville, California 94608
Phone (415) 653-6151
Order Placed By J. Deblock
Signature of Authorized Agent
[Signature]
Date 9/10/90
Title DEPARTMENT MANAGER

WASTE TO BE DISPOSED

Type Iron Oxide
2 Generating Location Emeryville, California 94608
Special Handling Instructions:
 Gloves Goggles Other _____
Quantity 100 Bbls.

DESIGNATED FACILITY

3 Name Liquio Waste Management Inc.
Address Star Rt. Box 4
City, State, Zip McKittrick CA 93251
Phone 805-762-7366

TRANSPORTER

(Hauler Must Complete)

Name Kern Vacuum Service
Address P. O. Box 5337
City, State, Zip Bakersfield, California 93388
Phone (805) 589-5220
Signature of Authorized Agent or Driver
[Signature]
Date 9-10-90

Ticket # 103976 Unit No. T-13 17-5
Pick Up Date 9-10-90 Time _____
 AM PM

NOTE: This form to be used in lieu of the California Department of Health Services Hazardous Waste Manifest for NON-HAZARDOUS wastes only.

REMARKS:

DISPOSAL FACILITY

(Facility Operator Must Complete)

Name L.W.M.
Address Star Rt Box 4
City, State, Zip McKittrick Ca 93251
Phone 762-7366 / Disp. Ticket # _____
Signature of Authorized Agent
[Signature] Date 9-10-90

Quantity Received 18.35 ^{TONS} Bbls. Date 9-10-90
Time _____
 AM PM pH# 7.0

DISPOSAL METHOD: Surface Impoundment Injection
 Landfill Other _____

Return Copy To: **GENERATOR UNLESS OTHERWISE SPECIFIED**
NOTE: It is not necessary to send copy to Dept. of Health Services.
NO HAZARDOUS FEES SHOULD BE LEVIED

THIS IS TO CERTIFY that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 commencing with Section 12700 of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food and Agriculture.

WEIGHMASTER CERTIFICATE

LIQUID WASTE MANAGEMENT, INC. — WEIGHMASTER
 STAR ROUTE BOX 4 • McKittrick, CA 93261
 (805) 762-7366

12498

WEIGHING LOCATION:
 HIGHWAY 58, 1/4 MILE WEST OF HIGHWAY 33
 MCKITTRICK, CALIFORNIA

If Waste Is Weighed it is 100% Nonhazardous

DATE	TIME	WEIGHT IN LBS.	
9-10-90	7:24PM	74580	GROSS
9-10-90	8:26PM	37880	TARE
		<u>36700</u>	NET
		<u>18.35</u>	TONS

GROSS BY *Thelma Villines*
 TARE BY *Thelma Villines*
 DEPUTY
 DEPUTY
 WEIGHED FOR / SELLER *Hareros Regimental*
 DELIVERED TO / BUYER *L.W.M.*
 DRIVER *James Cant*

VEHICLE LIC. NOS.	TRAILER LIC.	TRAILER LIC.	COMMODITY	UNITS	B/L NO.
<u>3257386</u> CARRIER	<u>10A9570</u>		<i>Iron Oxide</i>	<i>100-B</i>	<i>13965</i>
<i>Peru Vac H. T-13</i>					

FEE: PD CHG \$